

HOUSE BILL REPORT

HB 1538

As Reported by House Committee On: Health Care

Title: An act relating to hospital reporting of restrictions on health care practitioners.

Brief Description: Modifying hospital reporting of restrictions on health care practitioners.

Sponsors: Representatives Cody, Campbell and Morrell; by request of Department of Health.

Brief History:

Committee Activity:

Health Care: 2/4/05, 2/28/05 [DPS].

Brief Summary of Substitute Bill

- Expands requirements for hospitals to report to the state any actions that restrict or terminate a physician's clinical privileges to apply to actions that restrict or terminate the practice of other health care providers.

HOUSE COMMITTEE ON HEALTH CARE

Majority Report: The substitute bill be substituted therefor and the substitute bill do pass. Signed by 10 members: Representatives Cody, Chair; Campbell, Vice Chair; Morrell, Vice Chair; Bailey, Ranking Minority Member; Appleton, Clibborn, Green, Lantz, Moeller and Schual-Berke.

Minority Report: Do not pass. Signed by 5 members: Representatives Curtis, Assistant Ranking Minority Member; Alexander, Condotta, Hinkle and Skinner.

Staff: Chris Blake (786-7392).

Background:

Hospitals are required to report to certain state or federal government agencies when they take specific actions to restrict or terminate some health care providers' licenses. In Washington, when a hospital terminates or restricts the clinical privileges of a physician because of his or her commission of any act of unprofessional conduct, it must notify the Medical Quality Assurance Commission within 60 days of the action.

Nationally, hospitals and other health care entities must report any professional review actions that adversely affect a physician's or dentist's clinical privileges to the National Practitioner Data Bank (NPDB). Hospitals also have the option of reporting to the NPDB when any

adverse actions are taken against the clinical privileges of health care providers other than physicians and dentists. Reports must be made to the NPDB within 15 days from the date that the action was taken.

Summary of Substitute Bill:

The requirement that hospitals report to the Medical Quality Assurance Commission the restriction or termination of a physician's privileges due to the commission of an act of unprofessional conduct is broadened to include additional categories of health care providers. The broader requirements direct hospitals to report to the Department of Health (Department) when the practice of a health care provider is restricted, suspended, limited, or terminated due to the commission of an act of unprofessional conduct, or if it is voluntarily or involuntarily restricted or terminated to avoid action by a hospital.

The health care professions that are subject to the reports are: pharmacists, registered nurses, advanced registered nurse practitioners, dentists, naturopathic physicians, optometrists, osteopathic physicians and surgeons, osteopathic physician assistants, physicians, physician assistants, podiatrists, and psychologists.

The time for a hospital to report to the Department is reduced from 60 days to 15 days. A hospital, hospital administrator, or hospital executive officer that files a report is immune from liability related to the report. The Department must notify the reporting hospital of the disciplining authority's case disposition decision. The Department may not raise hospital license fees to pay for the program prior to July 2007.

Substitute Bill Compared to Original Bill:

The substitute bill adds registered nurses to the list of professions that must be reported by hospitals and removes occupational therapists, physical therapists, audiologists, and speech-language pathologists. The Department must notify the reporting hospital of the disciplining authority's case disposition decision. The Department may not raise hospital license fees to pay for the program before July 2007. The fine is reduced to no more than \$250 (current law). The Department's rule-making authority is removed. The good faith requirement for the hospital's immunity for reporting is removed.

Appropriation: None.

Fiscal Note: Available.

Effective Date of Substitute Bill: The bill takes effect 90 days after adjournment of session in which bill is passed.

Testimony For: This bill will advance patient safety by preventing poor health care practitioners from moving from one facility to another without any detection. The higher fine will help the Department of Health create the most appropriate penalty for failure to report.

Testimony Against: Offers to terminate should not be reportable. Any credentialed health care practitioner should be reportable. This bill will result in additional fees to hospitals. Hospitals are already required to make similar reports and these reports are not necessary. There is no evidence of underreporting. Hospitals in Washington are not traditionally regulated through civil penalties.

Persons Testifying: (In support) Laurie Jenkins, Department of Health.

(With concerns) Andy Dolan, Washington State Medical Association.

(Opposed) Lisa Thatcher, Washington State Hospital Association.

Persons Signed In To Testify But Not Testifying: Taya Briley, Washington State Hospital Association.